



## AMENDMENT TRANSMITTAL FORM

Commissioner for Patents P.O. Box 1450, Alexandria, VA 22313-1450

Attorney Docket No.: 000423 In Re Application of: Birnbaum et al.

**Serial Number:** 10/006,040 Filed: December 4, 2001 Examiner: James C. Clinger Group Art Unit: 2821

Dear Sir:

| In addition, the foll  1. A Request for  2. Information I  a. I  b. C  | th for filing is a Respowing documents are a (1) Month Extensi Disclosure Statement 2TO-1449 Copies of IDS Citation torney's Address in A Transmittal. | enclosed:<br>on of Time is<br>(IDS):<br>as (number of               | hereby   | requested.  |  | 10/28/0<br>Fee Paid                     | Tine hops |
|--|--|---|--|---|--|---|-----------|
| CLAIMS   | (a) Number<br>Remaining After<br>Amendment   | (b) Highest<br>Number<br>Previously Paid<br>For                     |  | (c)<br>Extra<br>Claims  | Large Entity Fee   | Fee Paid                                | Bon       |
| Total*   | 27   | 30  |  | 0   | x \$18 =   | \$0                                     |           |
| Independent**  | 3  | 3   |  | 0   | x \$84 =   | \$0                                     |           |
| Multiple Dependent Claim(s): ☐ Yes ☒ No  |  |   |  |   | \$280  | \$0                                     | ].        |
| EXTENSION FEES   |  |   | One Month  |   | \$110  | \$110.00                                |           |
|  |  |   | ☐ Two Months                                       |   | \$410  | \$0                                     |           |
|  |  |   | ☐ Three Months                                     |   | \$930  | \$0                                     |           |
| *If the number in column a is less than 20, enter 0 in column c.  **If the number in column a is less than 3, enter 0 in column c. |  |   |  |   | TOTAL FEE  | \$0                                     |           |
| <ul> <li>7. ☐ Please charge The Commiss any overpaym</li> <li>7. ☒ The Commiss to 37 CFR 1</li> </ul>                              | ioner is hereby authorient to said Deposit A sioner is further hereby. 25(b), any fee whats .18 inclusive, for the .2003                               | . 17-0026 of orized to charge count No. 1 by authorized oever which | QUALC<br>ge paym<br>7-0026.<br>to charg<br>may bec | OMM Incorporate of any addition A duplicate of the to said Depositions properly due | or extension fees.  ted the amount of \$110.00.  conal fees which may be required in the sheet is enclosed for fee put Account No. 17-0026, pursue or payable, as set forth in 3 thout specific additional authorized in the sheet feet and the sheet feet feet feet feet feet feet feet | processing. pant T CFR 1.16 porization. |           |

10/22/2003 AHONDAF1 00000109 170026 10006040

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